



*J. Gau*  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the **PATENT APPLICATION** of:

Shinzo Matsui

**Application No.:** 10/635,192

Our File: SAS2-PT056

**Confirmation No.:** 8321

Date: August 30, 2005

**Filed:** August 6, 2003

For: ILLUMINATION APPARATUS AND  
PROJECTOR DISPLAY APPARATUS

Group: 2851

Examiner: Melissa J. Koval

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

09/08/2005 AKELECHI 00000021 10635192  
01 FC:1806 180.00 OP

Sir:

Further to Applicant's Duty of Disclosure pursuant to 37 C.F.R. §1.56, Applicant wishes to bring to the Examiner's attention the material cited on the enclosed PTO-1449 form. Copies of the cited documents are enclosed.

Pursuant to 37 C.F.R. § 1.97(e)(1), the undersigned certifies that each item of information contained in this Supplemental Information Disclosure Statement was first cited in a Search Report from the European Patent Office, copy enclosed, in a counterpart foreign patent application not more than three (3) months prior to the filing of this Supplemental Information Disclosure Statement.

**Applicant:** Shinzo Matsui  
**Application No.:** 10/635,192

It is respectfully requested that the Examiner consider these documents and return an initialed copy of the PTO-1449 form indicating his consideration of the cited materials.

Respectfully submitted,

Shinzo Matsui

By Ryan W. O'Donnell  
Ryan W. O'Donnell  
Registration No. 53,401  
(215) 568-6400

Volpe and Koenig, P.C.  
United Plaza, Suite 1600  
30 South 17th Street  
Philadelphia, PA 19103

RWO/vs  
Enclosures



Sheet 1 of 1

FORM PTO-1449 <b>U.S. DEPARTMENT OF COMMERCE</b> <b>PATENT AND TRADEMARK OFFICE</b> <b>INFORMATION DISCLOSURE</b> <b>STATEMENT BY APPLICANT</b> (Use several sheets if necessary)			ATTY. DOCKET NO. SAS2-PT056		SERIAL NO. 10/635,192		
			APPLICANT Shinzo Matsui				
			FILING DATE August 6, 2003		GROUP 2851		
<b>U.S. PATENT DOCUMENTS</b>							
EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
<b>FOREIGN PATENT DOCUMENTS</b>							
		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION
							YES      NO
	AA	44 24 887 A 1	01/1995	DE			X*
	AB	2 800 500	05/2001	FR			X*
	AC	1 372 028 A2	12/2003	EP			
	AD	03/063477	07/2003	WO			
	AE	1 508 740 A1	02/2005	EP			
<b>OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)</b>							

\*Abstract Only

EXAMINER	DATE CONSIDERED

EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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Effective on 12/08/2004  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ ) 180.00

## Complete if Known

Application Number	10/635,192
Filing Date	August 6, 2003
First Named Inventor	Shinzo Matsui
Examiner Name	Melissa J. Koval
Art Unit	2851
Attorney Docket No.	SAS2-PT056

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_  
 Deposit Account Deposit Account Number: 22-0493 Deposit Account Name: Volpe and Koenig, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

<u>Fee (\$)</u>	<u>Small Entity</u>
50	25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200	100
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Multiple dependent claims

360	180
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<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-	=	x	= 0.00

HP = highest number of total claims paid for, if greater than 20

<u>Multiple Dependent Claims</u>	
<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
0.00	

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-	=	x	= 0.00

HP = highest number of independent claims paid for, if greater than 3

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	- 100 =	/ 50 = (round up to a whole number)	x _____	= 0.00

Fees Paid (\$)

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement (IDS)

180.00

## SUBMITTED BY

Signature	Ryan W. O'Donnell	Registration No. 53,401 (Attorney/Agent)	Telephone 215-568-6400
Name (Print/Type)	Ryan W. O'Donnell	Date September 1, 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/635,192
Filing Date	August 6, 2003
First Named Inventor	Shinzo Matsui
Art Unit	2851
Examiner Name	Melissa J. Koval
Attorney Docket Number	SAS2-PT056

### ENCLOSURES (Check all that apply)

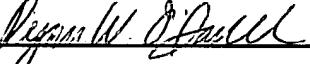
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<b>PTO-Form-1449; Cited References</b>		
<input type="checkbox"/> Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	VOLPE AND KOENIG, P.C.		
Signature			
Printed name	Ryan O'Donnell		
Date	September 1, 2005	Reg. No.	53,401

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Ryan O'Donnell	Date	September 1, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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